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PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

August 20, 2001

Date

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## UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Signature

Attorney Docket No. 7175-68263 First Inventor Edward W. Catton Title MEDICAL GAS ALARM SYSTEM Express Mail Label No. EL504431384US

See MPEP	APPLICATION ELEMENTS chapter 600 concerning utility patent application	n contents.	ASSISTANT Commissioner for Patents Box Patent Application Washington, D.C. 20231
1 J F	ee Transmittal Form (e.g., PTO/SB/17) Submit an original, and a duplicate for fee proces		
	pplicant claims small entity status. ee 37 CFR 1.27.		7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
(p - l	pecification [Total Pages   preferred arrangement set forth below]  Descriptive title of the invention Cross Reference to Related Applications Statement Regarding Fed sponsored R 8		a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. paper
	Reference to sequence listing, a table, or a computer program listing appendix Background of the Invention		c. Statements verifying identity of above copies
	Brief Summary of the Invention		ACCOMPANYING APPLICATION PARTS
	Brief Description of the Drawings (if filed)		
- (	Detailed Description Claim(s) Abstract of the Disclosure		9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement (when there is an assignee)  Power of Attorney
			11. English Translation Document (if applicable)
4. 🚺 D	rawing(s) (35 U.S.C. 113) [Total	180 ]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations
5. Oath or [	Declaration (únsiġned)[Total Pages	5 ]	13. Preliminary Amendment
a.	Newly executed (original or copy)		Return Receipt Postcard (MPEP 503)
b.	Copy from a prior application (37 (for continuation/divisional with Box 18		Certified Copy of Priority Document(s)
_	DELETION OF INVENTOR	•	15. (if foreign priority is claimed) Request and Certification under 35 U.S.C. 122
	Signed statement attached del	eting inventor(s)	(b)(2)(B)(i). Applicant must attach form PTO/SB/35
	named in the prior application, 1.63(d)(2) and 1.33(b).	see 37 CFR	or its equivalent.
6. A	pplication Data Sheet. See 37 CFR 1.76	i	17. Other: Express Mail Certificate
18. If a CC	ONTINUING APPLICATION, check approp	riate box, and s	supply the requisite information below and in a preliminary amendment,
	ation Data Sheet under 37 CFR 1.76: ontinuation Divisional Contin	auation in nar	rt (CIP) of prior application No.:
		iuation-in-pai	Group / Art Unit
For CONTINI	application information: Examiner	ntire disclosur	re of the prior application, from which an oath or declaration is supplied
under Box 5	<ul> <li>b. is considered a part of the disclosure of</li> </ul>	the accompan	ying continuation or divisional application and is hereby incorporated by seen inadvertently omitted from the submitted application parts.
	19. C	ORRESPON	NDENCE ADDRESS
Custoi	mer Number or Bar Code Label (Insert Custo	omer No. or Atta	or X Correspondence address below
	Ronald S. Henderson	· <u>·</u> ·····	
Name	Barnes & Thornburg		
Address	11 South Meridian Street		
Audiess			
City	Indianapolis	State	Indiana Zip Code 46204
Country	USA	Telephone	317-231-7341 Fax 317-231-7433
Name	(Print/Type) Ronald S. H enderson		Registration No. (Attorney/Agent) 43669

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## FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** 

\$3,412.00

Co	Complete if Known	
Application Number	Unknown	
Filing Date	Herewith	
First Named Inventor	Edward W. Catton	
Examiner Name	Unknown	
Group Art Unit	Unknown	
Attorney Docket No.	7175-68263	

METHOD OF PAYMENT	FEE CALCULATION (continued)							
1. The Commissioner is hereby authorized to charge indicated foee and credit any overpayments to:		DDIT			ES			
Deposit	Large I Fee	Entity Fee	Small Fee	Entity Fee	Fee	Description	nn .	Fee Paid
Account Number 10-0435	<b>Code</b> 105	( <b>\$)</b> 130	Code 205	(\$) 65	Surcharge - late	•		
Deposit Account Name  Barnes & Thornburg	127	50	227	25	Surcharge - late sheet	provisional	filing fee or cover	
	139	130	139	130	Non - English sp	ecification		
Under 37 CFR §§ 1.16 and 1.17	147	2,520	147	2,520		•	arte reexamination	
Applicant claims small entity status. See 37 CFR § 1.27	112	920*	112	920*	Requesting publi action	lication of S	IR prior to Examiner	
2. X Payment Enclosed:	113	1,840*	113	1,840*	Requesting publi	lication of S	IR after Examiner	
Check Credit card Money Other	115	110	215	55	Extension for re	ply within fir	st month	
FEE CALCULATION	116	390	216	195	Extension for re	ply within se	econd month	
1. BASIC FILING FEE	117	890	217	445	Extension for rep	ply within th	ird month	
Large Entity Small Entity	118	1,390	218	695	Extension for rep	ply within fo	urth month	
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	128	1,890	228	945	Extension for rep	ply within fif	th month	
101 710 201 355 Utility filing fee 710.00	119	310	219	155	Notice of Appea	1		
106 320 206 160 Design filing fee	120	310	220	155	Filing a brief in s	support of a	n appeal	
107 490 207 245 Plant filing fee	121	270	221	135	Request for oral	hearing		
108 710 208 355 Reissue filing fee	138	1,510	138	1,510	Petition to institu	ite a public	use proceeding	
114 150 214 75 Provisional filing fee	140	110	240	55	Petition to revive	e - unavoida	ble	
SUBTOTAL (1) \$710.00	141	1,240	241	620	Petition to revive	e - unintenti	onal	
	142	1,240	242	620	Utility issue fee	(or reissue)		
2. EXTRA CLAIM FEES Fee from	143	440	243	220	Design issue fee	•		
Extra Claims below Fee Paid	144	600	244	300	Plant issue fee			
Total Claims 139 -20** = 119 X 18.00 = 2,142.00 Independent 10 - 3** = 7 X 80.00 = 560.00	122	130	122	130	Petitions to the 0	Commission	ier	
Claims Multiple Dependent =	123	50	123	50	Processing fee u	under 37 CF	R § 1.17(q)	
Large Entity Small Entity	126	180	126	180	Submission of Ir Statement	nformation E	Disclosure	
Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581	40	581	40	Recording each (times number o	patent assign	gnment per property	
103 18 203 9 Claims in excess of 20	146	710	246	355	Filing a submiss (37 CFR § 1.12	ion after fina	al rejection	
102 80 202 40 Independent claims in excess of 3	149	710	249	355	For each additio	nal inventio	n to be examined	
104 270 204 135 Multiple dependent claim, if not paid 109 80 209 40 ** Reissue independent claims	179	710	279	355	(37 CFR § 1.12 Request for Con		mination (RCF)	
109 80 209 40 ** Reissue independent claims over original patent	169	900	169	900	Request for expe		• •	
110 18 210 9 ** Reissue claims in excess of 20	'09	300	103	300	of a design appli			
and over original patent	Oth	er fee (	specify)					
SUBTOTAL (2) \$2,702.00								
**or number previously paid, if greater; For Reissues, see above	*Red	duced b	y Basic	Filing	Fee Paid	SUBTO	TAL (3)	
SUBMITTED BY						Complete (i	f applicable)	
Name (Print/Type) Ronald S. Henderson		Registra (Attorney		p	43669	Telephone	317-231-7	341
Signature P 1 1 9 Mal.						Date	August 20, 20	001

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Serial No. Filing Date Unknown Herewith  Nention: MEDICAL GAS ALARM SYSTEM	Examiner Unknown	Group Art Unit Unknown
vention: MEDICAL GAS ALARM SYSTEM		
	•	
I hereby certify that the following correspondence:		
Utility Patent Application		
(Identify type	of correspondence)	
August 20, 2001 (Date)	Karen Taylo (Typed or Printed Name of Person Ma	
	(Signature of Person Mailing G	Correspondence)
	EL504431384	/ US
	("Express Mail" Mailing La	ibel Number)
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